

SPECIAL WASTE MANIFEST		Manifest Document No.	Page 1 of		
Generator's Name		Generator's Address		Generator's Telephone No.	
Origin of Special Waste (Project or Spill Location):					
Transporter #1 Company Name		Address		Telephone No.	
Transporter #2 Company Name		Address		Telephone No.	
Destination Facility Name/Site Address		Facility ID (Permit) Number		Telephone No.	
Type and Proper Name of Special Waste				Container(s) No.	Type
				Total Quantity	Unit Wt/Vol
Additional Descriptions for Special Waste Listed Above:					
Special Handling Instructions:					
GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described above by type and proper name of the special waste, and that such waste has been managed, packaged, containerized and labeled in accordance with the requirements of 20.9.8 NMAC (Special Waste Requirements) in addition to any other applicable federal, state or local regulations.					
Printed/Typed Name:		Signature:		Date:	
TRANSPORTER					
Transporter 1 Acknowledgement of Receipt of Special Waste					
Printed/Typed Name:		Signature:		Date:	
Transporter 2 Acknowledgement of Receipt of Special Waste					
Printed/Typed Name:		Signature:		Date:	
FACILITY					
Discrepancy Indication Space:					
Facility Owner or Operator: <i>I hereby acknowledge receipt of the special waste as indicated upon this manifest, except as noted above in the Discrepancy Indication Space.</i>					
Printed/Typed Name:		Signature:		Date:	

GENERATOR

TRANSPORTER

FACILITY